

# NJFREEZE

## Cross-Ice Hockey Development Program

The NJ Freeze Cross-Ice Hockey Development Program is designed to meet the needs of the beginner hockey player. Basic skills will be taught in a non-competitive environment. Fun, physical development, skill and a pleasurable environment will be stressed.

The NJ Freeze Cross-Ice Hockey Development Program will make your child's organized athletic experience a positive one. There's a lot of learning and the kids have FUN! Sign-up NOW and join the action.

Two, 1 hour sessions per week. (until Nov. 8<sup>th</sup>)  
 One hour games from Nov. 20<sup>th</sup>, 2010 to Feb. 19<sup>th</sup>, 2011

### Games/Practice Sessions on

Saturdays 1:15 to 2:15pm  
 Mondays 5:15 to 6:15pm (until Nov. 8<sup>th</sup>)

### Required Equipment

- Hockey skates
- Hockey gloves
- HECC approved hockey helmet w/shield
- Elbow pads
- Hockey pants
- Hockey stick
- Shin pads
- Shoulder pads



## Cross Ice Schedule

September	20	Mon.	5:15pm	December	4	Sat.	1:15pm
	25	Sat.	1:15pm		11	Sat.	1:15pm
	27	Mon.	5:15pm		18	Sat.	1:15pm
October	2	Sat.	1:15pm	January	8	Sat.	1:15pm
	4	Mon.	5:15pm		15	Sat.	1:15pm
	9	Sat.	1:15pm		22	Sat.	1:15pm
	11	Mon.	5:15pm		29	Sat.	1:15pm
	16	Sat.	1:15pm	February	5	Sat.	1:15pm
	18	Mon.	5:15pm		12	Sat.	1:15pm
	23	Sat.	1:15pm		19	Sat.	1:15pm
	25	Mon.	5:15pm				
	30	Sat.	1:15pm				
November	1	Mon.	5:15pm				
	6	Sat.	1:15pm				
	8	Mon.	5:15pm				
	13	Sat.	1:15pm				
	20	Sat.	1:15pm				
	27	Sat.	1:15pm				



## Program Includes Fee \$525

- 28 - one hour sessions at great practice & games times
- NJFreeze jersey & matching socks for all players
- Aspen Ice will register your player to USA Hockey (\$40 fee) Monthly subscription to USA Hockey Magazine

## 2010-11 NJFreeze Cross-Ice Hockey

### Application Form

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Parents Name \_\_\_\_\_  
 Home Phone \_\_\_\_\_  
 Cell/Work Phone \_\_\_\_\_  
 E-Mail \_\_\_\_\_

Please review and complete the reverse side

Please make checks payable to Aspen Ice and mail to

Aspen Ice

16 Aspen Drive, Randolph, NJ 07869

For your financial security, we no longer accept credit card information on the application over the phone or thru fax.

Please present your credit card payment at the rink.

**We do not accept American Express & Discover Cards**

## The ProShop

At Aspen Ice in Randolph

### Hockey Players' Starter Kit

- Skates
- Pants
- Shoulder pads
- Helmet w/cage
- Elbow pads
- Hockey bag
- Gloves & stick
- Shin pads

Most of the equipment will last several years - All for \$200

# Aspen Ice Youth Participant - 2010-11 season READ BEFORE SIGNING

In consideration of being allowed to participate in any way in the Aspen Ice programs, related events and activities of Aspen Ice Inc., I \_\_\_\_\_, the undersigned, acknowledge, appreciate, and agree that:

1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown of my participation in Aspen Ice, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation in Aspen Ice. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS THE Aspen Ice Inc., their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
5. Arbitration: In further consideration of allowing me to participate in the aforementioned activities, I hereby agree to submit to binding arbitration any and all claims which I believe I may have against the facility arising from my activities at the facility. The arbitration shall be pursuant to the rules of the American Arbitration Association. The arbitrators shall apply the Federal Rules of Evidence to all proceedings.

Arbitration shall be commenced within one (1) year from the date on which any alleged claim first arose. Further, the arbitration shall be held in the town where the Arena is located, unless otherwise mutually agreed to by all the parties. The submission to the American Arbitration Association shall be unlimited and the arbitration award may be enforced by any court of competent jurisdiction.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

FOR PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE  
(UNDER AGE 18 AT TIME OF REGISTRATION)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

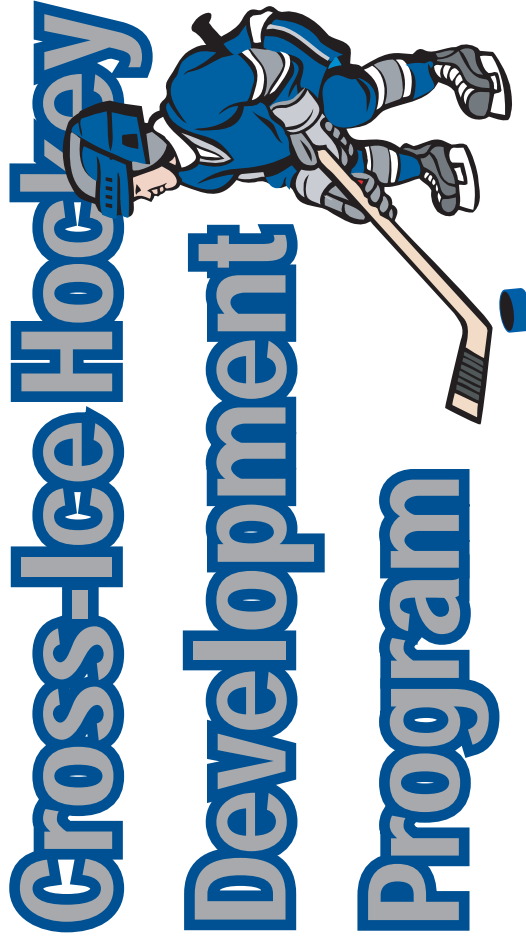
X \_\_\_\_\_ Date Signed: \_\_\_\_\_

PARENTS or GUARDIANS PARTICIPANT'S SIGNATURE

EMERGENCY PHONES # (s) \_\_\_\_\_



# NJ FREEZE



## The fun starts September 20<sup>th</sup>, 2010



For Kids 8 yrs. old & younger  
Birth years '02 - '03 - '04

www.Aspen-Ice.com • email: [www.hockey@aspen-ice.com](mailto:www.hockey@aspen-ice.com)

973-927-9122 • Fax 973-927-9123